

16GP1645

PTO/SB/22 (10-00)

Approved for use through 10/31/2002. OMB 0651-0031
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)
28341/6276NCP

In re Application of Gabriel Vogeli, et al.	
Application Number 09/698,419	Filed October 27, 2000
For: G PROTEIN-COUPLED RECEPTORS EXPRESSED IN BRAIN	
Group Art Unit 1645	Examiner J. Ulm

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____

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A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

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The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2855

I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record.

attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) 48,484

November 25, 2002

Date

Signature

Sharon M. Sintich

Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below



1 forms are submitted.

110.00

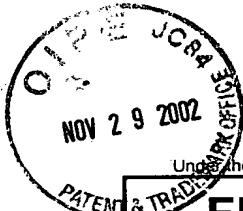
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, Washington, DC 20231, on the date shown below.

Dated: November 25, 2002

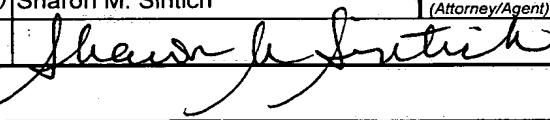
Signature:

(Sharon M. Sintich)

12/02/2002 WADDEI1 00000037 09698419
01 FC:1251

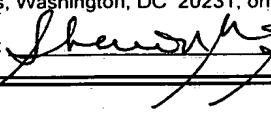


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FEE TRANSMITTAL for FY 2003		Complete if Known															
Patent fees are subject to annual revision.		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>09/698,419</td> </tr> <tr> <td>Filing Date</td> <td>October 27, 2000</td> </tr> <tr> <td>First Named Inventor</td> <td>Gabriel Vogeli</td> </tr> <tr> <td>Examiner Name</td> <td>J. Ulm</td> </tr> <tr> <td>Group Art Unit</td> <td>1645</td> </tr> <tr> <td>Attorney Docket No.</td> <td>28341/6276NCP</td> </tr> </table>				Application Number	09/698,419	Filing Date	October 27, 2000	First Named Inventor	Gabriel Vogeli	Examiner Name	J. Ulm	Group Art Unit	1645	Attorney Docket No.	28341/6276NCP
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Attorney Docket No.	28341/6276NCP																
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27																	
TOTAL AMOUNT OF PAYMENT		(\$)		110.00													
METHOD OF PAYMENT (check all that apply)				FEES CALCULATION (continued)													
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account				3. ADDITIONAL FEES													
Deposit Account Number		13-2855															
Deposit Account Name		MARSHALL, GERSTEIN & BORUN															
The Commissioner is hereby authorized to: (check all that apply)																	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments																	
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application																	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																	
FEES CALCULATION																	
1. BASIC FILING FEE																	
Large Entity		Small Entity															
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description													
1001	740	2001	370	Utility filing fee													
1002	330	2002	165	Design filing fee													
1003	510	2003	255	Plant filing fee													
1004	740	2004	370	Reissue filing fee													
1005	160	2005	80	Provisional filing fee													
SUBTOTAL (1) (\$)		0.00															
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																	
Total Claims		Extra Fee from Claims	Fee Paid														
Independent Claims																	
Multiple Dependent																	
Large Entity		Small Entity															
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description													
1202	18	2202	9	Claims in excess of 20													
1201	84	2201	42	Independent claims in excess of 3													
1203	280	2203	140	Multiple dependent claim, if not paid													
1204	84	2204	42	** Reissue independent claims over original patent													
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent													
SUBTOTAL (2) (\$)		0.00															
** or number previously paid, if greater; For Reissues, see above																	
*Reduced by Basic Filing Fee Paid																	
SUBTOTAL (3) (\$)																	
110.00																	
Complete (if applicable)																	
Name (Print/Type)	Sharon M. Sintich		Registration No. (Attorney/Agent)	48,484	Telephone (312) 474-6632												
Signature			Date	November 25, 2002													

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